



Registration Number: 202501018937 (1620351-U)

## MALAYSIAN CODE FOR INSTITUTIONAL INVESTORS SIGNATORY FORM

(Effective from 1 January 2026)

PROFILE OF THE ORGANISATION	
Name of Organisation:	
Year of Incorporation:	
Head Office Address:	Country Representative Office Address (where applicable):
Postcode:	Postcode:
Telephone No:	Telephone No:
Fax no:	Fax no:
Website Address:	
Name of Chairman:	
Name of CEO (or equivalent):	
Name of Country Representative (where applicable):	
CATEGORY OF ORGANISATION	ASSET UNDER MANAGEMENT (AUM)
<input type="checkbox"/> Public retirement, pension or superannuation plan <input type="checkbox"/> Private retirement, pension plan or superannuation plan <input type="checkbox"/> Corporate retirement, pension or superannuation plan <input type="checkbox"/> Insurance <input type="checkbox"/> Foundation <input type="checkbox"/> Fund management/asset management <input type="checkbox"/> Unit trust or other collective investment vehicle <input type="checkbox"/> Sovereign wealth fund <input type="checkbox"/> Others (please specify)  .....  (Please tick where applicable)	<input type="checkbox"/> < RM100 million <input type="checkbox"/> ≥ RM100 million < RM1 billion <input type="checkbox"/> ≥ RM1 billion < RM50 billion <input type="checkbox"/> ≥ RM50 billion < RM100 billion <input type="checkbox"/> ≥ RM100 billion < RM500 billion <input type="checkbox"/> > RM500 billion  (Please tick)



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**Authorised Signatory**

Name : E-mail :  
Designation : Telephone No :  
Date :

**Please email the completed Signatory Form to [admin@iicm.org.my](mailto:admin@iicm.org.my)**